

COM APPI	ATTORNEY'S DOCKET PG3671USW First Names Inventor: Anthony Patrick JONES								
() Dec	Complete if known: App No.:								
()Deci:	aration submitted after initial	filing (surcharge required 37CFR1.16(e))		Filing Date					
				Group Art Unit:					
	As below named	d inventor. I hereby declare that:							
	My residence, post office address and citizenship are as stated below next to my name.								
	irst and joint inventor ought on the invention								
Ü		METERING V	ALVE						
	the specification of which (check only one item below):								
	[]is attached hereto. OR [x] was filed on 23 February 2000 as United States application Serial No or PCT International								
	Application Number PCT/EP00/01446 filed and was amended on (MM/DD/YYYY)(if applicable)								
in in the second	I hereby state that I have as amended by any amended	the above-identified specification	, including the claims,						
	I acknowledge the duty to	acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.							
I hereby claim foreign priority benefits under 35, U.S.C. §119 (a)-(d) or §365(b) of any foreign application or inventor's certificate or 365(a) of any PCT international application which designated at least one countr United States of America, listed below and have also identified below, by checking the box, any foreign apparent or inventor's certificate or of any PCT international application having a filing date before that of the which priority is claimed:									
	r Foreign Application	PRIORITY CLAIMS UNDER 35 U.S.C Country	Foreign Filing Date	PRIORITY					
	Number (s)		(MM/DD/YYYY))	CLAIMED					
1. 9905		GB	March 12, 1999	X					
2. 9918	3388.1	GB	August 5, 1999	X					
3.									
4 . 5 .									
	claim the benefit under T	itle 35, United States Code §119(e) of an	y United States provisional applic	cation(s) listed below:					
	Application No.	Filing Date	e (MM/DD/YYYY)						
1.									
2.		I I							





COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

21

3

ADDRESS

GlaxoSmithKline

Five Moore Drive, POBox 13398

ATTORNEY'S DOCKET NUMBER PG3671USW

North Carolina 27709, US

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

		tability as defined in 37 C.F.R. \$1.56 which be ling date of this application:	ecame available betwe	een the filing date o	f the prior application(s)) and the national or	
PRIOR	PUS PARENT	APPLICATION or PCT PARENT	APPLICATION	-			
TICL	C.S. I AIREN I A	dilleanon of terranent	AITLICATION		STATUS (Check of		
118	Parent Application or	DCT Parent Filing	Data	STATUS (Check one) PATENTED PENDING ABANDONED			
U.S.	Number	PCT Parent Parent Filing (MM/DD/YY		PATENTED	PENDING	ABANDONED	
	Tunioei	(min	111)		 		
						,	
POWED	OF ATTORNEY.	The desired for the Call	· · · · · · · · · · · · · · · · · · ·	′ ′ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			
		As a named inventor, I hereby appoint the follourk Office connected therewith. (List name and			cute this application and	transact all business	
設康nc O.	3. I attitt and Tradema	TK Office Connected therewith. (Elst hame and	1 registration number,	,			
Dav	vid J. Levy		P. Riek Reg	g. No. 39,009	Bonnie L. Deppenbrock Reg. No. 28,209		
	arles E. Dadswell	Reg. No. 35,851 Virgini	ia C. Bennett Reg	g. No. 37.092	John L. Lemanowicz Reg. No. 37,380		
Kar	en L. Prus	Reg. No. 39 337 Frank I	P.Grassler Reg	g. No. 31,164	Amy H. Fix Reg. No.	42,616	
Rot Eur	bert H. Brink			g. No. 36,334			
Rot Eliz	zabeth Selby	Reg. No. 38,298 Lorie A	Ann Morgan Reg	3. No. 38,181			
2022	orrespondence to:				Direct Telephone Cal	ls to	
ia end C	David J. Levy, Pate		. 122412 1123 112 <u>3 1134 1331 1331</u>	1111	Direct receptions 52.	13 10.	
¥		tual Property Department	. 188 1/18/14 88 11/ 88 11/88/18/18/18	Christopher P. Rogers			
4 juli:	GlaxoSmithKline	and Property Zopartment	22217	919-483-1240			
 	Five Moore Drive,		23347				
	Research Triangle		PATENT TRADEMARK OF		<u>.</u>		
H		that all statements made herein of my					
T		elieved to be true; and further that the					
M	statements and the	he like so made are punishable by fine	e or imprisonmen	t, or both, under	r 18 U.S.C. 1001, a	nd that such willful	
	false statements	may jeopardize the validity of the app	plication or any pa	atent issuing the	ereon.		
	CLUL NAME	FAMILY NAME	FIRST GIVEN NAME	,	SECOND GIVEN NAME/I	ENITI A I	
0)2	FULL NAME OF INVENTOR	JONES	Anthony		Patrick		
V_{\sim}	INVENTOR'S	Signature	C American -		Date:		
	SIGNATURE	x Patrillan			x 31 AUGO		
0	RESIDENCE &	CITY	STATE OR FOREIGN		COUNTRY OF CITIZENS	HIP	
	CITIZENSHIP	Ware		X	GB		
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COU		
1	ADDRESS	GlaxoSmithKline	Durham		North Carolina 27709, US		
		Five Moore Drive, PO Box 13398				*	
,	FULL NAME	*	DIRECT CIVEN NAME		COCOND CIMEN NAMED		
0 P2		FAMILY NAME ANDERSON	FIRST GIVEN NAME	:	SECOND GIVEN NAME/I	NITIAL	
110	OF INVENTOR	ANDERSON	Gregor		John, McLennar	NITIAL 1	
00	OF INVENTOR INVENTOR'S		Gregor			NITIAL	
00	OF INVENTOR	ANDERSON	Gregor STATE OR FOREIGN	COUNTRY	John, McLennar	nitial n zool	
	OF INVENTOR INVENTOR'S SIGNATURE	ANDERSON Signature AWAY AWAYAW CITY Ware	Gregor STATE OR FOREIGN GB GB	COUNTRY	John, McLennai Date: X OM SCOT COUNTRY OF CITIZENS GB	NITIAL 11 ZOOI	
0	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE	ANDERSON Signature AWAW AWAW CITY Ware POST OFFICE ADDRESS	STATE OR FOREIGN GB SB	COUNTRY	John, McLennai Date: X OM SCOT COUNTRY OF CITIZENS GB STATE & ZIP CODE/COL	NITIAL 1 ZOOI HIP	
	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP	ANDERSON Signature AWAY AWAY CITY Ware POST OFFICE ADDRESS GlaxoSmithKline	Gregor STATE OR FOREIGN GB GB	COUNTRY	John, McLennai Date: X OM SCOT COUNTRY OF CITIZENS GB	NITIAL 1 ZOOI HIP	
0	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	ANDERSON Signature AWAY CITY Ware POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, POBox 13398	STATE OR FOREIGN GB SB	N COUNTRY	John, McLennar Date: X	NITIAL 1 ZOOI HIP SINTRY 27709, US	
2	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS FULL NAME	ANDERSON Signature AWAY CITY Ware POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, POBox 13398 FAMILY NAME	STATE OR FOREIGN GB CITY Durham EIRST GIVEN NAME	N COUNTRY	John, McLennar Date: X	NITIAL 1 ZOOI HIP SINTRY 27709, US	
2	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF INVENTOR	ANDERSON Signature X CITY Ware POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, POBox 13398 FAMILY NAME RAND	Gregor STATE OR FOREIGN GB CITY Durham EIRST GIVEN NAME Pau	N COUNTRY	John, McLennar Date: X	NITIAL 1 ZOOI HIP SINTRY 27709, US	
0	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF INVENTOR INVENTOR'S	ANDERSON Signature X CITY Ware POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, POBox 13398 FAMILY NAME RAND	Gregor STATE OR FOREIGN GB CITY Durham EIRST GIVEN NAME Pau	N COUNTRY	John, McLennai Date: X OM SCOT COUNTRY OF CITIZENS GB STATE & ZIP CODE/COU North Carolina SECOND GIVEN NAME/I Kenneth	NITIAL 1 ZOOI SHIP STRY 27709, US	
2	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF INVENTOR INVENTOR'S SIGNATURE	ANDERSON Signature X CITY Ware POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, POBox 13398 FAMILY NAME RAND Signature X Aul Kennoth	STATE OR FOREIGN GB GB CITY Durham FIRST GIVEN NAME PAUL	N COUNTRY	John, McLennai Date: X OM SCOT COUNTRY OF CITIZENS GB STATE & ZIP CODE/COU North Carolina SECOND GIVEN NAME/I Kenneth Date: X I OH Se	NITIAL 1 ZOOI HIP ENTRY 27709, US NITIAL	
2	OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF INVENTOR INVENTOR'S	ANDERSON Signature X CITY Ware POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, POBox 13398 FAMILY NAME RAND	Gregor STATE OR FOREIGN GB CITY Durham EIRST GIVEN NAME Paul STATE OR FOREIGN	N COUNTRY	John, McLennai Date: X OM SCOT COUNTRY OF CITIZENS GB STATE & ZIP CODE/COU North Carolina SECOND GIVEN NAME/I Kenneth	NITIAL 1 ZOOI HIP ENTRY 27709, US NITIAL	

Durham